Fill	in this information to identify your ca	ase:									
Del	otor 1 Eugene C Jo	ones									
	otor 2 Margaret C .	Jones			_						
Uni	ted States Bankruptcy Court for the	SOUTHERN DISTRIC	T OF OHIO								
Cas	se number 2:15-bk-55766					Check if this is	:				
(If kr	nown)		=			☐ An amende	ed filing				
						A supplement 13 income		g postpetition llowing date:	chapter		
0	fficial Form 106I					MM / DD/ Y	/YYY				
S	chedule I: Your Inc	ome							12/1		
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and you th you, do not incl	r spouse i ude infori	is liv matio	ing with you, incl on about your spo	ude inform ouse. If mo	ation about re space is r	your needed,		
1.	Fill in your employment information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse				
	If you have more than one job,	Funnis, manual atatus	☐ Employed			■ Employed					
	attach a separate page with information about additional employers.	Employment status	■ Not employed				mployed				
		Occupation			book k	book keeper					
	Include part-time, seasonal, or self-employed work.			Stewar	Stewart Interiors						
	Occupation may include student or homemaker, if it applies.	Employer's address				1941 Otsego Ave Coshocton, OH 43812					
		How long employed to	here?				l4 yr				
Par	t 2: Give Details About Mor	thly Income									
Esti spou	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have more aspace, attach a separate sheet to	ate you file this form. If you			-		on on the lin	nes below. If y			
						FOI DEDIOFT		otor 2 or ng spouse			
2.	List monthly gross wages, salar deductions). If not paid monthly,			2.	\$	0.00	\$	320.67			
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	0.00			
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	320.67			

Debt Debt		Eugene C Jones Margaret C Jones		Ca	ase number (<i>if known</i>)	2:	15-bk-55766	
		-	=					
				F	For Debtor 1		For Debtor 2 or	
	C = =	viling 4 hore	4.	\$	0.00	ŗ	non-filing spouse	
	Сор	y line 4 here	4.	Φ	0.00	4	320.6	<u>/</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	85.3	2
	5b.	Mandatory contributions for retirement plans	5b.	\$		\$		
	5c.	Voluntary contributions for retirement plans	5c.	\$		9		
	5d. 5e.	Required repayments of retirement fund loans	5d. 5e.	\$		9		
	5f.	Insurance Domestic support obligations	5f.	\$	0.00	9	0.0	
	5g.	Union dues	5g.	\$		9	0.0	
	5h.	Other deductions. Specify:	5h.+	٠ \$		+ \$		
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	0.00	9	85.3	2
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		9		
8.			•	Ψ		,	200.0	<u> </u>
Ο.	8a.	all other income regularly received: Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	9	0.0	0
	8b.	Interest and dividends	8b.	\$		9		
	8c.	Family support payments that you, a non-filing spouse, or a dependent						<u></u>
		regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	9	0.0	n
	8d.	Unemployment compensation	8d.	\$		9		
	8e.	Social Security	8e.	\$		9		
	8f.	Other government assistance that you regularly receive					-	
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	;					
		Nutrition Assistance Program) or housing subsidies.						
		Specify: OPERS	8f.	\$	332.10	\$	0.0	0
	8g.	Pension or retirement income	8g.	\$	693.11	\$	383.5	4
	Oh	SS FOR DISABLED DAUGHTER	Ob i		0.00		649.0	n
	8h.	Other monthly income. Specify: BETH	8h.+	⊦ \$.—	0.00	+ 4	, 043.0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,526.21	9	1,868.	54
			_	_				
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,526.21 + \$		2,103.89 = \$	4,630.10
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						,
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.					
		ude contributions from an unmarried partner, members of your household, your	depen	der	nts, your roommate	s, a	nd	
		r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not :	availah	nle t	to nav evnenses lis	ted	in Schedule I	
	Spe		avanas	010	to pay expended no	.cu	11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain						
	appl	•	III LIGIO	,,,,,,	o and reduced Bac	۸, ۱۰	12. \$	4,630.10
							Comb	ined
								hly income
13.	Do y	you expect an increase or decrease within the year after you file this form	?					
		No.						
		Yes. Explain:						

ill in this infor	mation to identify y	our case:					
Debtor 1	Eugene C J	ones				k if this is:	
Debtor 2	Manageret C	lamaa			_	An amended filing	uing poetpetition char
Spouse, if filing	Margaret C	Jones					ving postpetition char the following date:
	,				_		
nited States Ba	ankruptcy Court for th	e: SOUTI	HERN DISTRICT OF OHIO		ı	MM / DD / YYYY	
ase number f known)	2:15-bk-55766						
Official F	Form 106J						
Schedu	le J: Your	Exper	nses				
Be as comple nformation. I	te and accurate a	s possible eeded, atta	. If two married people ar				
	scribe Your Hous joint case?	ehold					
	o to line 2.						
	Does Debtor 2 live	in a senai	ate household?				
	No	a sopai					
		ıst file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate Housel	nold of Debt	or 2.	
Do you h	nave dependents?	□No					
Do not lis Debtor 2.	st Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not st							□ No
depender	nts names.			Granddaughter	•	20	■ Yes
				Cuandalawahta	_	26	□ No
				Granddaughter			■ Yes
				Daughter		48	□ No ■ Yes
				Daagner			■ Yes □ No
				Son-In-Law		50	■ Yes
							□ No
				Daughter		56	■ Yes
expense	expenses include s of people other and your depende	than 📮	l No l Yes				
art 2: Es	timate Your Ongo	ing Month	ly Expenses				
			uptcy filing date unless y cy is filed. If this is a supp				
pplicable da		·				•	
clude exper	nses paid for with	non-cash	government assistance i	f vou know			
e value of s	uch assistance ar		cluded it on Schedule I: Y			Your exp	oneoe
fficial Form	106l.)					rour exp	enses
	al or home owners and any rent for the		nses for your residence. In or lot.	nclude first mortgage	4. \$		0.00
If not inc	luded in line 4:						
4a. Re	al estate taxes				4a. \$		0.00
	operty, homeowner	s, or rente	r's insurance		4b. \$		0.00
	me maintenance, r				4c. \$		195.00
4d. Ho	meowner's associa	ation or con	dominium dues		4d. \$		0.00

5. Additional mortgage payments for your residence, such as home equity loans

0.00

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Debtor 1 Eugene C Jones
Debtor 2 Margaret C Jones

largaret C Jones Case number (if known) 2:15-bk-55766

	ugene C Jones			
ebtor 2 M	argaret C Jones	Case numb	er (if known)	2:15-bk-55766
1 14:1141 -				
Utilities: 6a. El	ectricity, heat, natural gas	6a.	\$	295.00
	ater, sewer, garbage collection		\$	155.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	her. Specify:	6d.	\$	295.00
	d housekeeping supplies	ou. 7.	\$	0.00
	re and children's education costs	7. 8.	\$	750.00
		o. 9.	\$	0.00
-	g, laundry, and dry cleaning		·	250.00
	Il care products and services	10.	\$	64.00
	and dental expenses	11.	\$	378.00
	ortation. Include gas, maintenance, bus or train fare. Include car payments.	12.	\$	495.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ble contributions and religious donations	14.	\$	0.00
Insuran	<u> </u>	14.	Ψ	0.00
	clude insurance deducted from your pay or included in lines 4 or 20.			
	ie insurance	15a.	\$	0.00
	ealth insurance	15b.		0.00
	Phicle insurance	15c.	·	53.02
	her insurance. Specify:		\$	0.00
	Oo not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Specify:	To not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	ent or lease payments:			
17a. Ca	ar payments for Vehicle 1	17a.	\$	0.00
17b. Ca	ar payments for Vehicle 2	17b.	\$	0.00
17c. Of	her. Specify:	17c.	\$	0.00
17d. Of	her. Specify:	17d.	\$	0.00
Your pa	yments of alimony, maintenance, and support that you did not report as			
	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other pa	syments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	al property expenses not included in lines 4 or 5 of this form or on Sche			
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.	·	0.00
	operty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
	omeowner's association or condominium dues	20e.	·	0.00
Other: S	pecify:	21.	+\$	0.00
Calculat	e your monthly expenses			
	l lines 4 through 21.		\$	2,930.02
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	l line 22a and 22b. The result is your monthly expenses.		\$	2,930.02
Auc	This LLG and LLD. The result to your monthly expenses.		Ψ <u></u>	2,530.02
	e your monthly net income.			
23a. Co	ppy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,630.10
23b. Co	ppy your monthly expenses from line 22c above.	23b.	-\$	2,930.02
		Γ		
	ubtract your monthly expenses from your monthly income.	00-	¢	1 700 09
Th	ne result is your monthly net income.	23c.	\$	1,700.08
For exam	expect an increase or decrease in your expenses within the year after your leading to you expect to finish paying for your car loan within the year or do you expect your on to the terms of your mortgage?	u file this r mortgage p	form? payment to incre	ease or decrease because of a
■ No.				
— No.	Explain here:			